

F15000002650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



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04/13/15--01035--019 \*\*78.75

FILED  
15 JUN 16 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

W15-26099

JUN 1 8 2015

S. GILBERT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 15, 2015

MATT MESSINGER  
510 CHARMANY DRIVE., SUITE 269  
MADISON, WI 53719

SUBJECT: WISCONSIN CENTER FOR EDUCATION PRODUCTS AND  
SERVICES, INC.  
Ref. Number: W15000026099

We have received your document for WISCONSIN CENTER FOR EDUCATION PRODUCTS AND SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 215A00007484



WISCONSIN CENTER for  
EDUCATION PRODUCTS & SERVICES

RECEIVED

15 JUN 16 PM 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

June 11, 2015

Dear Ms. Gilbert,

We were recently notified that our Business Registration for the State of Florida was rejected. Enclosed you will find our Letter of Good Standing from the State of Wisconsin which should fulfill the necessary documents needed to become registered.

If there are additional requirements needed please let me know as soon as possible. Email is the best method to contact me. [bethany.nelson@wceps.org](mailto:bethany.nelson@wceps.org)

Best,

Bethany Nelson  
WCEPS  
608-441-2774  
[bethany.nelson@wceps.org](mailto:bethany.nelson@wceps.org)

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Wisconsin Center for Education Products and Services, Inc.  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Matt Messinger

Name of Person

Wisconsin Center for Education Products and Services

Firm/Company

510 Charmany Dr., Suite 269

Address

Madison, WI 53719

City/State and Zip Code

store@wceps.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt Messinger

Name of Person

at (608) 441-2774

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:

1. Wisconsin Center for Education Products and Services, Incorporated

(Name of corporation; must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Wisconsin 3. 27-3813061  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 23, 2010 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. January 2012  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 510 Charmany Drive, Suite 269 Madison WI 53719  
(Principal office address)

same as above

(Current mailing address)

8. Educational Materials  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Business Filings Incorporated

Office Address: 515 E. Park Avenue

Tallahassee

(City)

Florida

32301

(Zip Code)

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15 JUN 16 PM 2:56  
TALLAHASSEE, FLORIDA

**10. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Mary Jo Spalinger, Asst. Secretary  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Brad Taylor

Address: 3014 Woods Edge Way  
Fitchburg, WI 53711

Vice Chairman: Michael Falk

Address: WARF - 614 Walnut Street, Madison, WI 53726

Director: Ann Wallace

Address: 6117 Birch Hill Drive  
Madison, WI 53711-3305

Director: Jeff Russell

Address: DLS - UW Madison, 21 N. Park Street, Madison, WI  
53715

**B. OFFICERS**

President: Matt Messinger

Address: 510 Charmany Drive, Suite 269  
Madison, WI 53719

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_


Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MATTHEW J. MESSINGER, EXECUTIVE DIRECTOR  
(Typed or printed name and capacity of person signing application)

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

**WISCONSIN CENTER FOR EDUCATION PRODUCTS AND SERVICES, INC.**

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is November 23, 2010.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on June 10, 2015.

A handwritten signature in cursive script that reads "George Petak".

GEORGE PETAK, Administrator  
Division of Corporate and Consumer Services  
Department of Financial Institutions



DFI/Corp/33

**To validate the authenticity of this certificate**

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>